OT O 6 MILE TRADEMENT

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 10/4/04 Signature: June Ryan)

IFW 3626

Docket No.: SPLT-P01-001

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Mark J. Stender

Application No.: 09/843841

Group Art Unit: 2166

Filed: April 30, 2001

Examiner: Not Yet Assigned

For: SYSTEM AND METHOD FOR PROVIDING

WEB-BASED USER INTERFACE TO

LEGACY, PERSONAL-LINES INSURANCE

APPLICATIONS

CHANGE OF ATTORNEY DOCKET NUMBER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Please note that the Attorney Docket Number has been changed from TRAV0-001 to SPLT-P01-001. Please reference SPLT-P01-001 on all future correspondence.

Applicant believes no fee is due. However, if a fee is due, please charge our Deposit Account No. 18-1945, under Order No. SPLT-P01-001 from which the undersigned is authorized to draw.

Dated: 10/4/04

Respectfully submitted,

Agnes S. Lee

Registration No.: 46,862 ROPES & GRAY LLP One International Place

Boston, Massachusetts 02110-2624

(617) 951-7000 (617) 951-7050 (Fax)

Attorneys/Agents For Applicant

PTO/SB/96 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Typed or printed name

Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Mark J. Stender Application No./Patent No.: Filed/Issue Date: 09/843841 April 30, 2001 SYSTEM AND METHOD FOR PROVIDING WEB-BASED USER INTERFACE TO LEGACY, Entitled: PERSONAL-LINES INSURANCE APPLICATIONS Travelers Property Casualty Corp. corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) (Name of Assignee) states that it is: x the assignee of the entire right, title, and interest; or an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is % in the patent application/patent identified above by virtue of either: A. [x] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012292 . . Frame 0086 , or for which a copy thereof is attached. OR B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: 1. From: The document was recorded in the United States Patent and Trademark Office at Reel ______ , Frame _____ , or for which a copy thereof is attached. The document was recorded in the United States Patent and Trademark Office at Reel ______, Frame ______, or for which a copy thereof is attached. 3. From: The document was recorded in the United States Patent and Trademark Office at _____, Frame , or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Daniel W. Jackson, Esq.

| | Assistant Secretary, Travelers Property Casualty Corp. Title | | | |
|----------|--|--|--|--|
| | g deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in | | | |
| 16/11/11 | Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. nature: (Joanne Ryan) | | | |

(860) 277-4012 Telephone Number OT O'S 2004 WE Und

PTO/SB/80 (12-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

| Intereby appoint: X Practitioners associated with the Customer Number: 28120 OR | Practitioners associated with the Customer Number: OR Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name Registration Number Registration Number Registration Number Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Date Date Date AUMALLA Date PRAYIZUMA | | | | | | | | |
|--|--|--|---------------------|------------------------------|----------------------------|---|--|--|--|
| Practitioner(s) named below (if more than len patent practitioners are to be named, then a customer number must be used): Name Registration Number | Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name Registration Number | I hereby appoint: | | | | | | | |
| Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name Registration Number | Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name Registration Number | x | Practitioners a | associated with the Custo | omer Number: | 28120 | | | |
| as attomey(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Date Page 172 Y 120 3 Y | as attomey(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and ritle is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Date Page 17 2 9 4 4 5 4 5 4 5 4 5 4 5 4 5 6 6 6 6 6 6 6 | | OR | | | | | | |
| as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Date PARY 120 344 | as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and tittle is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Date PARY 120 34 | | Practitioner(s) | named below (if more than | ten patent practitioners a | ire to be named, the | en a customer number must be used): | | |
| any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date PAR 9/2 4/2 0 34 | any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date Place Date Place Pla | Γ | | Name | | Regist | ration Number | | |
| Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date Plate Pla | Assignee Name and Address: Travelers Property Casualty Corp. A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date Place Pla | any a | nd all patent appli | cations assigned only to the | undersigned according to t | s Patent and Tradem he USPTO assignmen | nark Office (USPTO) in connection with nt records or assignment documents | | |
| required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Daniel W. Jackson, Esq. Signature Date Play 412024 | required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date Play 4/2024 | | - | | <u> </u> | | | | |
| The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date 9/24/2024 | The individual whose signature and title is supplied below is authorized to act on behalf of the assignee Name Danjel W. Jackson, Esq. Signature Date Play 12029 | required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of | | | | | | | |
| Signature Date 9/24/2024 | Signature Wund War Date 9/24/2024 | | | | | | | | |
| Number 9/201 | Number 9/201 | | Name | Danjel W. Jackson, | Esq. | | | | |
| Title Assistant Secretary // Telephone / (860) 277-4012 | Title Assistant Secretary // Telephone / (860) 277-4012 | | | Nurll | - Jan | Date | 9124/2029 | | |
| | | | Title | Assistant Secretary | // | Telephone | / (860) 277-4012 | | |